

C-7

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Nelson L. Bruce,	COURT CASE NUMBER 2:22-cv-02211-BHH-MGB
DEFENDANT PENTAGON FEDERAL CREDIT UNION et al.	TYPE OF PROCESS Civil

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
C T CORPORATION SYSTEM (registered agent for: LexisNexis Risk Management, Inc.)
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
2 Office Park Court, Suite 103, Columbia, South Carolina 29223

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Nelson L. Bruce
c/o P.O. Box 3345
Summerville, South Carolina 29484

Number of process to be served with this Form 285

1

Number of parties to be served in this case

5

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Contact information for Service on Registered Agent
(864) 240-3302
Hours of Operation M-F from 9:00 a.m. to 4:30 p.m.

Plaintiff

Signature of ~~Attorney~~ other Originator requesting service on behalf of:

Nelson L. Bruce

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

843-437-7901

DATE

12-8-2022

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>71</u>	District to Serve No. <u>71</u>	Signature of Authorized USMS Deputy or Clerk <u>Judy Sping</u>	Date <u>2/15/2023</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Lisa Culler

Address (complete only different than shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date

2-17-23

Time

8:55

☒ am
☐ pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee <u>65.00</u>	Total Mileage Charges including endeavors <u>218.655 = \$13.76</u>	Forwarding Fee <u>0</u>	Total Charges <u>\$78.76</u>	Advance Deposits <u>0</u>	Amount owed to U.S. Marshal* or (Amount of Refund*) <u>\$78.76</u> <u>-50.00</u>
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REMARKS: FWD TO color ops for pls.

THIS PERSON IS AUTHORIZED TO ACCEPT PROCESS ON BEHALF OF PERSON BEING SERVED!

DISTRIBUTE TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 11/13